Joint crop and livestock services for smallholder farmers in Uganda

Locations
Uganda

Dates
01/01/2021 – 31/12/2021

Summary
Crop and livestock health is crucial to agricultural productivity and farmer livelihoods. However, in low-income countries, smallholders are often left without sufficient support to deal with crop and animal problems due to existing agricultural extension services being understaffed and underfunded. CABI’s work in plant health and plant clinics over the last 15 years has revealed potential ‘One Health’ (OH) benefits of broadening the scope of plant clinics to better meet farmers’ need for advice. This project will develop integrated crop/livestock health advisory services that will enable male and female smallholder farmers in Uganda to address major health and production problems affecting crops, livestock and food safety.

The problem
Agricultural productivity, animal and plant health are intrinsically linked to the health of humans, livestock and the environment in many different ways. Livelihoods, food security and food safety rely on healthy plants and animals which in turn need robust production systems. However, smallholder farmers often face challenges that impact production.

The Platform for Agricultural Risk Management (PARM) identified pests and diseases in crops and livestock among the most important constraints to agricultural productivity in several African countries, including Uganda. Some of the causes include:

- Insufficient crop and livestock extension officers and vets
- Limited awareness and knowledge among farmers of crop and livestock
- Health management
- Lack of practical and actionable solutions for farmers
- Poor soil fertility and crop/livestock nutrient management
The crop, livestock and veterinary sectors share similar challenges when delivering timely, quality services to smallholders. Such patterns are common in low-income countries, notably remote communities where the need for adapted services to safeguard rural livelihoods is huge.

CABI's work with plant clinics over the last 15 years, under the Plantwise programme, has highlighted potential OH (cross-sectoral, value-added action to solve inter-related problems) benefits of broadening their scope in order to better meet farmers' demands for agricultural advice.

Similarities were first noted in Nicaragua, Bangladesh and Uganda between 2005-2007 where plant clinics informally responded to farmers’ requests for advice on livestock. A survey of 180 plant doctors from five counties (including Uganda) confirmed this trend and the need for integrated health services – over 80% said they regularly receive queries from farmers on livestock topics because farmers have nowhere else to go.

The project’s overall goal will be to contribute to improving the health and livelihoods of smallholder farming families in East Africa.

So far, experiences with integrated crop-livestock clinics are informal and underdocumented. This CABI-led project will test how, and under what circumstances, such a farmer service can operate effectively and with what benefits. The outcome will support the development of an integrated clinic model that adds value to existing farmer services.

Through integrated OH-oriented services, crop-livestock health advisory services that enable both male and female smallholder farmers to address major health and production problems affecting crops, livestock and food safety, will be piloted in Uganda.

The project has three main objectives:

1. Improving access to joint crop-livestock health advisory services for 1200 smallholder female and male farmers
2. Strengthening the crop-livestock service advisory system among plant and livestock outreach services
3. Exploring the possibilities of expanding the model to farmers in Kenya from lessons learnt from the pilot in Uganda

The project key activities involve collecting farmer baseline information and practices on OH, establishing and operationalizing 80 joint crop-livestock clinics and consultation sessions in four districts of Uganda, training crop and animal health officers in identified OH topics and providing relevant information materials for farmers and veterinary staff on OH topics.

Other activities will include assessing farmers’ demand for livestock advice at plant clinics in Kenya and sharing experiences from the Uganda pilot with relevant crop-livestock stakeholders in Kenya to pilot crop-livestock clinics and consultations in Kenya.

Farmer baseline information on OH practices and knowledge gaps have been collected and data collection tools have been digitized to enable better capture, analysis and use. These are hosted at the MAAIF National Food and Agricultural Statistics System (NFASS).

Joint crop-livestock clinics/consultation centres are operational in the project’s four districts (Mukono, Luwero, Buikwe, Kayunga) in Uganda and since their launch, over 441 farmers (181 female and 260 males), inclusive of repeat visits, have visited between April and mid-September 2021. The main crops and plants taken to the clinics include bananas, coffee, cocoa, tomato, other cereals and fruits and vegetables as well as some diseased tree samples. For livestock advice, farmers have taken cattle, chickens, pigs and goats. Other animals such as rabbits, turkeys and pets (cats and dogs) were also taken to the joint clinics for advice on vectors, feeding or shelter.

Lessons learned so far from the joint clinics include increased awareness among staff and farmers on the interrelated health issues between plant, animal health and the environment. But also the joint services promote cross-learning among agriculture and veterinary staff and among farmers in aspects of crop and animal pests and diseases.
They discuss management practices and interrelated health issues, share experiences and learn from each other.

At the clinics, farmers freely share their problems with the plant and veterinary doctors and get real-time advice tailored to their specific needs and prevention. The data captured during sessions is useful for tracing farmers and following up on queries while farmers and extension staff can access more information through materials provided eg factsheets relevant to farmers’ specific problems. Farmers’ demand for crop and livestock advice is broad and diverse and advisors get backstop support from senior officials who visit the clinic session – an important part of the service model.

The village-based, mobile clinic approach (used in the pilot districts) increased farmer reach, allowing proximity to farmers who would not know how to access advisors but also enables easier follow-ups because the farmer’s home would be within reach. The joint service approach offers opportunities for cost-saving, cost-efficiency and improved service delivery eg through shared staff transport by staff, staff planning and training together.

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**Partners**

Ministry of Agriculture, Animal Industry and Fisheries (MAAIF), Makerere University, District Local Governments of the four districts in Uganda, VSF International in Kenya

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